Date

2006-07-06

			UnderthePa	spensorkReductorActer1995	undersourness d'in equissabouq	o accelector of informations	unimentatephayes/veildOMbcontolinumber
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known			
				lication Number	10/581,873		
FEE TRANSMITTAL				g Date	June 5, 2006		
for FY 2007				Named Inventor	Tim Niggemeier et al.		
Applicant claims small entity status. See 37 CFR 1.27				miner Name	Mark A. Giardino Jr.		
				Jnit	4113		
TOTAL AMOUNT OF PAYMENT (\$) 120			Atto	rney Docket No.	PD030127		
METHOD OF PAYMENT (check all that apply) CUSTOMER NUMBER 24498							
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :							
□ Deposit Account Deposit Account Number: 07-0832 Deposit Account Name: THOMSON LICENSING LLC							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee							
Charge any additional fee(s) or underpayments of fee(s)							
Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card							
WARNING: information information and authori	on this form ma zation on PTO-2	y become public. Credit o 038.	ard informa	ation should not b	e Included on this f	orm. Provide cr	edit card
FEE CALCULATIO	N						
1. BASIC FILING,		ND EXAMINATION F					
				H FEES		EXAMINATION FEES	
Application Typ	e Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entir	∑ Fee(\$)	Small Entity Fee(\$)	Fees Paid (\$)
Utility	310	155	510	255	210	105	rees raid (4)
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	***************************************
Reissue	310	155	510	255	620	310	***************************************
Provisional	210	105	0	0	0	0	anness announcement
		103	•	•	-	•	Small Entity
2. EXCESS CLAIM FEES Fee Description Fee (\$)							Fee (\$)
Each claim over 20 (including Reissues) 50							25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims						370	185
Total Claims		Claims Fee(\$)	E	ee Paid (\$)			Dependent Claims
-20 or		_ x	= -			Fee (\$	Fee Paid (\$)
		paid for, if greater than 20.	_				***************************************
Indep. Claims		Claims Fee(\$)	E	ee Paid (\$)			
3 or		X X t claims paid for, if greater	= -				
-		t claims paid for, it greater	man 3.				
3. APPLICATION S		xceed 100 sheets of par	or (avolud	ing electronical	ly filed segmence o	r computer	
listings und	er 37 CFR 1.52	(e)), the application size	e fee due i	is \$250 (\$125 fo	r small entity) for	each additions	al 50
sheets or fra	ction thereof.	See 35 U.S.C. 41(a)(1)(G) and 37	CFR 1.16(s).			
Total Shee	ts Extra S	heets Number o	f each ac	iditional 50 or	fraction therec	f Fee (\$)	Fee Paid (\$)
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S)							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): One-Month Extension of Time							\$120.00
SUBMITTED BY							
Cinnatura	//Deiteann Lin//			Registration No.	42804	Telephon	se 609,734,6813

Reitseng Lin

Name (Print/Type)